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| <b><i>Index of Claims</i></b><br><br> | <b>Application/Control No.</b><br><br>10562455 | <b>Applicant(s)/Patent Under Reexamination</b><br><br>SIGON ET AL. |
|  | <b>Examiner</b><br><br>JENNIFER A SMITH        | <b>Art Unit</b><br><br>1793  |

|   |                 |   |                   |   |                     |   |                 |
|---|-----------------|---|-------------------|---|---------------------|---|-----------------|
| ✓ | <b>Rejected</b> | - | <b>Cancelled</b>  | N | <b>Non-Elected</b>  | A | <b>Appeal</b>   |
| = | <b>Allowed</b>  | ÷ | <b>Restricted</b> | I | <b>Interference</b> | O | <b>Objected</b> |

☐ Claims renumbered in the same order as presented by applicant
 ☐ CPA
 ☐ T.D.
 ☐ R.1.47

| CLAIM |          | DATE       |            |  |  |  |  |  |  |
|-------|----------|------------|------------|--|--|--|--|--|--|
| Final | Original | 08/25/2008 | 12/20/2008 |  |  |  |  |  |  |
|       | 1        | ÷          | ✓          |  |  |  |  |  |  |
|       | 2        | ÷          | ✓          |  |  |  |  |  |  |
|       | 3        | ÷          | ✓          |  |  |  |  |  |  |
|       | 4        | ÷          | ✓          |  |  |  |  |  |  |
|       | 5        | ÷          | ✓          |  |  |  |  |  |  |
|       | 6        | ÷          | ✓          |  |  |  |  |  |  |
|       | 7        | ÷          | ✓          |  |  |  |  |  |  |
|       | 8        | ÷          | ✓          |  |  |  |  |  |  |
|       | 9        | ÷          | ✓          |  |  |  |  |  |  |
|       | 10       | ÷          | ✓          |  |  |  |  |  |  |
|       | 11       | ÷          | ✓          |  |  |  |  |  |  |
|       | 12       | ÷          | N          |  |  |  |  |  |  |
|       | 13       | ÷          | N          |  |  |  |  |  |  |
|       | 14       | ÷          | N          |  |  |  |  |  |  |
|       | 15       | ÷          | N          |  |  |  |  |  |  |
|       | 16       | ÷          | N          |  |  |  |  |  |  |
|       | 17       | ÷          | N          |  |  |  |  |  |  |
|       | 18       | ÷          | N          |  |  |  |  |  |  |
|       | 19       | ÷          | N          |  |  |  |  |  |  |
|       | 20       | ÷          | N          |  |  |  |  |  |  |
|       | 21       | ÷          | N          |  |  |  |  |  |  |
|       | 22       | ÷          | N          |  |  |  |  |  |  |